

.
REGISTRATION FORM

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C/O Diane M. Lovell
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Salt Lake City, UT 84115
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*Please indicate which STW I
session you plan to attend:*

- 9 Session #1
April 4, 11 & 18
1:00 to 5:00 p.m.
- 9 Session #2
May 8, 15 & 22
8:00 a.m. to Noon

Name _____ Name _____
Name _____ Name _____
Telephone _____ Fax _____
Company _____ Email _____
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\$ _____ Enclosed (payable to Central Region Council on Workforce Services or CRCWS)

**The Central Region Council of Workforce Services is a catalyst for exceeding the needs of our employers,
job seekers, service providers and community through efficiency, equality, responsibility and value.**

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